

POSITION	ID NO.	DATE
CLASSIFIER	11	6/17/94
EXAMINER	1313	6/19/94
TYPIST	SPM 318	6/13
VERIFIER	290	6-14-94
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
Final	
Original	
1	11-21-94
2	7-21
3	15
4	✓
5	✓
6	✓
7	✓
8	✓
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SYMBOLS

- ✓ Rejected
- Allowed
- (Through numbers) Cancelled
- Restricted
- Non-elected
- Interference
- Appeal
- Objected

Claim	Date
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